

## EXPENDITURE REPORT

☐ ORIGINAL REPORT    ☐ ADDITIONAL REPORT    ☐ FINAL REPORT

INSTRUCTIONS	Agency Number	Agency Name		Program Name			CARS Use Only	
	Agency Type	Agency Address		Contract Administrator/Program Manager – Name			Date Entered in CARS	
Report Period (mm/dd/yyyy) Begin Date: End Date:	Contact Person – Name and Telephone Number			Contract Period (mm/dd/yyyy) Begin Date: End Date:		Operator Initials		
Category of Activity	PROFILE Name	PROFILE ID Number	Contract Month Expenditures (Use Whole Dollars)	Contract to Date Expenditures (Use Whole Dollars)	Budget/Contract Amount (Use Whole Dollars)	Contract to Date Expenditures (Agency share if Required/Match)		
						Cash	In-Kind	
<b>TOTALS</b>								
Under penalty of perjury, I certify the information here is true and correct. I further certify the expenditures reported are accurate summarization's of the financial data contained on the Agency's financial records.		<b>SIGNATURE</b> – Authorized Agency Representative		Title – Authorized Agency Representative		Date Signed		

**DISTRIBUTION:** Original - Submit to Division of Management and Technology, BFS, CARS Unit, PO Box 7850, Madison WI 53707 unless directed to do otherwise by Contract Administrator or Program Manager.  
Copy - Retain for Agency Records

# INSTRUCTIONS FOR COMPLETING EXPENDITURE REPORT, DMT-862

## Please Type or Print

Check the box to indicate type of expenditure report. The choices are Original Report or Addition Report. There should be only one original report per report period. Corrections to previously reported periods should be made on additional reports. If this is the final report for the contract, mark on the top of the page, in red ink, "FINAL REPORT".

1. **Agency Number** Enter the CARS agency number from the contract.
2. **Agency Name** Enter the name of the reporting agency.
3. **Program Name** Enter the name of the program providing funds for the reporting agency.
4. **Agency Type** Enter the one or two-digit agency type from the contract.
5. **Contract Administrator /  
Program Manager** Enter name of state contract administrator / program manager.
6. **Report Period** Enter the beginning and ending date of the month covered by this report.
7. **Contact Person** Print or type the name of the person preparing this report.
8. **Telephone Number** Enter the telephone number of the person preparing this report.
9. **Contract Period** Enter the beginning and ending date of the contract period.
10. **Category of Activity** Enter breakdown of expenditures and revenues required by contract.  
(e.g., Admin. Expenses, Support Expenses. . . . . ) Provide total line  
for each separate PROFILE ID.
11. **Profile Name** For each total, enter the name of the CARS PROFILE.
12. **Profile ID Number** For each total, enter the CARS PROFILE ID.
13. **Current Month Expenditures** Enter current month expenditures for each line of activity.  
Used to enter information into the CARS System.
14. **Contract to Date Expenditures** Enter the contract to date expenditures for each line of activity.  
Used for information into the CARS system.
15. **Budget / Contract Amount** Enter total contract of budget amount allocated to each line of activity.
16. **Contract to Date Expenditures  
(Agency Share)** Complete as instructed by Contract Administrator / Program Manager.
17. **Title of Authorized Agency  
Representative** Enter the title of the authorized agency representative.
18. **Authorized Agency  
Representative Signature** Enter the signature of the authorized agency representative.  
The original signature copy must be send to the CARS Unit.
19. **Date Signed** Enter the date the report was signed.
20. **Distribution** Send to:  
Division of Management and Technology  
Bureau of Fiscal Services  
CARS Unit, Processing Unit  
PO Box 7850  
Madison WI 53707-7850